ONE ME – STAND UNITED FOR PREVENTION

GUIDE TO ASSESSING NEEDS AND RESOURCES AND SELECTING SCIENCE-BASED PROGRAMS

Prepared for:

State of Maine
Department of Behavioral and Developmental Services
Office of Substance Abuse

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CONDUCTING A NEEDS AND RESOURCES ASSESSMENT

Congratulations on being selected as a One ME – Stand United for Prevention coalition! The Office of Substance Abuse (OSA) is looking forward to working with you to reduce tobacco use and binge drinking among teenagers in your community and throughout the state.

Over the next few months you will be conducting an extensive assessment of needs and resources in your community. This assessment is intended to assist you in developing a risk and protective factor profile to be used in selecting science-based prevention programs that, when implemented, will address the needs of youth in your community.

Many of you have conducted some type of needs analysis in the past, but some coalitions have not. This Manual will help guide you through the process, from helping you understand why and what you are assessing, to collecting and reviewing data on the elements impacting substance use, to analyzing and making the information you have gathered meaningful in a community profile, and finally, to selecting the program(s) your coalition will implement. We have included an introduction to the elements of program evaluation as well, namely developing logic models and evaluation plans. To help keep you organized, a checklist of major activities and a sample timeline are provided for you in Appendices A and Appendix B, respectively. Many of the assessment activities can be performed simultaneously. Keep in mind that by June 1, you must indicate to One ME staff what program(s) you have selected to implement and submit a needs and resources assessment to substantiate your choices. This guide will help you in that endeavor. There is a lot to be done between now and then, so it is crucial that this assessment occur as a coalition-wide activity and not just become the responsibility of one or two people.

By now, you have spoken with the One ME staff person for your region. One ME staff are excited to be working with you and are ready to assist. If you have any questions at anytime throughout the process, do not hesitate to call One ME staff or Hornby Zeller Associates, Inc. (HZA), the local evaluator for One ME who is also available to provide technical assistance to One ME coalitions. Telephone numbers and email addresses for One ME staff, HZA and RTI International, the consulting firm responsible for the state-level evaluation, are provided in Appendix F.

Why Conduct a Needs and Resources Assessment?

A needs and assets assessment has two primary goals: (1) understanding the nature and extent of the general substance abuse problem and (2) identifying the risks and assets that characterize the neighborhoods and/or particular populations that contribute to the problem(s). Your ability to bring about positive change depends on your accurate understanding of the underlying factors that increase and decrease the risk for substance abuse. These factors are the behaviors, attitudes, conditions, or events that cause, influence, or pre-dispose an individual to resist or become involved in the problem behavior relative to substance use/abuse.[1]

In addition to increasing your understanding of youth substance use in your community, completing an assessment of needs and resources will assist your coalition in targeting its resources. For example, are you targeting an appropriate age group? Are there certain towns or geographic areas on which you should focus? Are certain program models more appropriate to your circumstances? Would they be more effective? These questions are especially important given the current economic climate where financial resources are scarce.

The assessment process can function as a coalition-building tool, since it is designed to be a coalition-wide effort and not the sole responsibility of the coalition coordinator. It will help coalition members to think more deeply about the specific strengths and needs in your community and engage in a dialogue about how to best address the issues.

The process may also serve to reenergize prevention efforts. We know that most of you will be implementing a science-based program that you have never before tried. This initiative is a chance to learn more about science-based prevention programs, develop new relationships within your community and bring attention to the issue of teen alcohol and tobacco use.

The assessment process entails two steps: assessing need and assessing resources. Both can be accomplished concurrently.

[1] Chapter 1: Determine Prevention Needs and Assets, Achieving Outcomes: A Practitioner's Guide to Effective Prevention (2002 Conference Edition). U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse, p. 11.

Assessing Areas of Need

The first step in the needs assessment process will involve the review of data on alcohol and tobacco use from the Maine Youth Drug and Alcohol Use Survey (MYDAUS). The MYDAUS data will be used to measure the prevalence of tobacco use and binge drinking and the age of initiation of alcohol and tobacco use. Substance use indicators available through the Office of Substance Abuse (OSA) will also be reviewed. The OSA indicator data for substance use will provide you with information on the extent of the substance use problem in your county as compared to the state.

The next step will be to gather risk and protective factor data. Risk factors are conditions that can increase the likelihood of substance use, whereas protective factors buffer youth from the negative consequences of exposure to risks. Developing a profile of these factors in your community will help you to identify the risks that should be addressed and the assets that can reduce the chances of problem behaviors arising among teenagers.

The information available through surveys and archival data will not provide a complete picture of your community[2]. Therefore, more in-depth, community-specific information should be collected. This can be done through the conduct of an "environmental assessment."

The environmental assessment will look more closely at policies, norms and messages about teenage drinking and use of tobacco in your community. In particular, you will be examining:

- Youth substance use policies and laws and the degree to which they are enforced;
- Substance use norms and perceived availability of alcohol and tobacco; and
- Prevention and pro-use messages in the media and in establishments that sell alcohol and tobacco products.

Information will be gathered through interviews and focus groups with community experts. This data will be supplemented with a "community scan," completed by coalition members. A community scan is a review of the retail and business climate to understand the messages provided to youth regarding substance use. For instance, are signs prominently displayed regarding laws pertaining to the sale of tobacco or alcohol to underage persons? This aspect of the needs assessment is discussed more fully in the "Collecting Data" chapter.

[2] Please note that OSA recognizes that some One ME coalitions have unique circumstances such as target populations for whom data as referenced in this guide is not readily available. The following coalitions are included in that group: Portland Partnership for Homeless Youth (homeless population); Waponahki Prevention Coalition (Maine Indian Education); River Coalition (may have need for international data from Canada).

Assessing Community Strengths and Coalition Resources

By examining community resources, you will learn more about the alcohol and tobacco prevention and treatment programs already serving youth in your area. You will be asked to speak with representatives of those programs and then develop a comprehensive directory of information, including their target population and the risk factors they address. You will also create a list of agencies serving youth in your area.

After completing the inventory of community resources, we anticipate that you will have introduced your One ME coalition to many key people in the community and gained support for the initiative. During this phase, you may also have identified potential partners, secured additional resources and placed yourself in a better position to build upon the work of others and to avoid duplication of efforts.

To complete the assessment process, you will take a closer look at your coalition. Having completed other parts of the needs and resources assessment, you will have spoken with many community members and gained a better understanding of the external factors that could either help or hinder your work. This understanding will put you in a better position to examine the functioning of your organization and to make adjustments where necessary.

To assess your coalition, you will conduct an analysis of its internal strengths and weaknesses, as well as external opportunities and threats. Guidelines on how to do this are provided for you in the last section of the “Collecting Data” chapter.

Collecting Data

Several methods can be employed to conduct a community needs and resources assessment. Specific to substance abuse prevention, your data on needs should provide an understanding of:

- When youth first begin substance use and why;
- The types of substances being used;
- The characteristics of users; and
- The extent and nature of continuing substance use in your community.

With that in mind, we have identified the following data collection methods as the most appropriate and feasible for the One ME project. They involve the collection of information from:

- Maine Youth Drug and Alcohol Use Survey (MYDAUS);
- Archival data sources;
- Interviews;
- Community focus groups;
- An environmental scan;
- Community organizations; and
- Your own coalition.

This document tells you where to find survey and archival data pertinent to your community.

Substance Use Data

The specific goals of One ME are to achieve a 15 percent reduction in tobacco use and a 10 percent reduction in binge drinking among youth over the life of the project. Tobacco use and binge drinking were selected because they represent the most serious problems among Maine youth, as demonstrated in previous assessments. To determine a baseline and understand the scope of substance use among youth ages 12 to 17 in your target communities, you will use two tools: MYDAUS results and OSA indicators.[3]

MYDAUS Indicators

Many of you referenced the MYDAUS data in the problem analysis section of your grant application. MYDAUS is a voluntary and confidential survey completed by youth in grades 6 through 12 in many schools across the state. One of the primary

[3] Some coalitions may not be required to use MYDAUS, as the data is not relevant to their target groups.

goals of the MYDAUS is to identify substance use patterns among Maine students. Another is to show trends over time.

The MYDAUS website contains a system that allows users to generate reports at various levels, including: state, region, county and school district/school. State, regional and county reports are available to the public; the school district and school reports require a user name and password. User names and passwords are provided to superintendents and principals of those schools participating in the MYDAUS.

The MYDAUS website displays a list of available reports, including state, regional and county reports, results for each survey question and summary reports that contain state, regional and county comparisons for MYDAUS 2002.

Summary Reports

You can access summary reports for your county, by going to OSA's website[4] and clicking on the MYDAUS hyperlink. Next, choose *Summary Reports: Demographic and State, Regional and County Comparisons, MYDAUS 2002.* Select the following reports from the drop-down list:

- *Previous 30-Day Use – Cigarettes;*
- *Previous 30-Day Use – Smokeless Tobacco; and*
- *Previous 2-Week Participation in Binge Drinking.*

As you look at the summary reports, consider the following:

- How does your county compare with surrounding counties? Your region? The state?
- Does one substance appear to be more of a problem than others?

County Reports

To take a more in-depth look at previous 30-day use of tobacco and binge drinking for the area you serve, select *View County Reports* from the MYDAUS reports system. Next, select your county from the drop-down menu and generate the following reports:

- *Previous 30-Day Use by Grade, Gender, and Year – Cigarettes;*
- *Previous 30-Day Use by Grade, Gender, and Year – Smokeless Tobacco; and*

[4] The MYDAUS data can be accessed via the OSA website, located at: http://www.maineosa.org/data/mydaus.

- *Previous 2-Week Participation in Binge Drinking by Grade, Gender and Year.*

Questions to consider as you review the county-level reports include:

- Is there a pattern of use in a certain grade that is of particular concern? If yes, take a look at the county reports by grade. These reports will compare a particular grade in your county with the state average for that grade. What did you find?
- What is the age of the population you intend to serve? How does that population compare with the state average for the same age group?
- Is there a difference in use among males and females?
- The county reports show data from 1998, 2000 and 2002. Has there been any noticeable increase or decrease in alcohol or tobacco use?

School District/School Level Reports

Most of you have signed agreements with your local schools and should be able to access MYDAUS data at the school district or school level. On the MYDAUS website, enter the school district or school's user name and password to access the school-level reports. For each school district and/or school within your area, generate the same reports on previous 30-day use of tobacco products and previous 2-week participation in binge drinking that you ran for the county level. How do they compare with the county? With the state averages?

The data referenced above will give you a picture of current substance use as reported by youth, but it is also important in prevention to know at what age substance use is initiated and how that trend has developed over time. To understand when youth begin to use alcohol and tobacco[5], complete the following two steps:

1. Generate the 2002 MYDAUS county and school district/school reports entitled *Age First Used Marijuana, Cigarettes, and Alcohol – Grades 11 and 12.*

2. Run the *Age First Used Marijuana, Cigarettes, and Alcohol – Grades 11 and 12* report for the 1998 and 2000 MYDAUS.

[5] Note: the *Age First Used* reports do not include information on smokeless tobacco.

Questions to consider as you review the school-level reports include:

- Are a large percentage of youth in your community initiating alcohol and cigarette use before age 14? Is there a noticeable difference in the age of initiation of alcohol versus cigarette smoking?
- Are there any notable trends in the age of initiation of alcohol and cigarette use?

RTI International, the One ME state-level evaluator, will be providing each coalition with *A Profile of Coalition Schools using MYDAUS 2002 Data*. This document gives you additional information on substance use among youth in the schools that your coalition covers as compared with the state. You should review the profile for your community and compare it with the information you gathered on your own. The document also includes information on risk and protective factors that will be helpful when you create a risk and protective factor profile of your community in the next section of the assessment.

OSA Indicator Data

The Maine Office of Substance Abuse (OSA) collects indicator data on state substance use. These indicators were validated as part of the Six State Consortium Project, during which 42 indicators were found to be statistically significant across the six participating states. Those indicators include a variety of data such as Unemployment, Free and Reduced-price Lunch, Net Migration and Adults in Substance Abuse Treatment. Although you may be interested in all of the indicators, the list below highlights the ones concerning substance use.

- Juvenile Arrests for Alcohol Violations;
- Juvenile Arrests for Drug Law Violations;
- Adult Drunken Driving Arrests;
- Adult Alcohol-related Arrests;
- Adult Drug-related Arrests;
- Alcohol-related Traffic Fatalities; and
- Drug Use During Pregnancy.

The indicator data, available at the county level on OSA's website, will be another source for you to reference and to assess the extent of the substance use problem in your community.[6] Looking at the table that displays the rate or percentage for each indicator, ask yourself: How does your county compare with the state-level data? How does your county compare with surrounding counties?

[6] Many of the OSA indicators will also be examined as part of your community's assessment of risk factors, as described in the following section.

It may be helpful to compile the rates for each of the indicators in a table like the one in Appendix C[7]. Putting all of the information on the same page will help you later as you make comparisons and analyze your community's need.

Creating a Risk and Protective Factor Profile

Creating a risk and protective factor profile for your community is simply a matter of bringing together information about the conditions that increase the chances of teens participating in alcohol and tobacco use and the assets that serve to protect youth against these conditions. The concept is that the risks in your community may be offset by the factors protecting youth. The profile will help to focus your efforts as you select science-based prevention programs that address specific needs and build upon the strengths of your community. This profile will utilize risk and protective factors as identified by the Center for Substance Abuse Prevention's (CSAP) Western Center for the Application of Prevention Technology (CAPT) and MYDAUS. The mission of CAPT is to assist states, communities and community-based organizations in the application of research-based knowledge in substance abuse prevention programs, practices, and policies.

Risk Factors

Risk factors are conditions for a group, individual or defined geographic area that increase the likelihood of a substance use/abuse problem occurring.[8]

We want you to be able to spend thoughtful time on interpreting the data you have available, so risk factor data will be limited to the two data sources listed below:

1. MYDAUS; and
2. Office of Substance Abuse Indicators.

As indicated above, both data sources can be accessed via OSA's website.[9]

Risk factors may be assessed at various levels: in the community, the school, the family or the individual and his or her friends. You will gather data on the risk factors in each of the following domains:

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[7] The table in Appendix C asks you to list data for the years 1990, 1995 and 2000. For some indicators, the only data available is for 1990 and 2000. Other indicator data is available for 1995 and 2000, but not 1990 (e.g., juvenile arrests for alcohol violations). You should fill out the table as completely as possible given the data available.

[8] Chapter 1: Determine Prevention Needs and Assets, Achieving Outcomes: A Practitioner's Guide to Effective Prevention (2002 Conference Edition). U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse, p. 7.

[9] http://www.maineosa.org

Community Domain

- Availability of drugs;
- Community laws and norms favorable to drug use;
- Transitions and mobility;
- Neighborhood attachment and community disorganization; and
- Extreme economic and social deprivation.

School Domain

- Low commitment to school;
- Early and persistent anti-social behavior; and
- Academic failure beginning in late elementary school.

Family Domain

- Family history of substance abuse;
- Family management problems;
- Family conflict; and
- Favorable parental attitudes/involvement.

Peer/Individual Domain

- Alienation and rebelliousness;
- Friends who engage in the problem behavior;
- Favorable attitudes toward the problem behavior; and
- Early initiation of the problem behavior.[10]

Once you access the MYDAUS and OSA indicators via OSA's website you will want to complete the "Risk Factor Data Tables" in Appendix D.

MYDAUS Risk Factor Reports display the percentage of students by grade, reporting the presence of the various risk factors. County percentages and state averages are displayed in the reports in both graphic and tabular formats. The OSA indicator data is available only at the state and county level. You should use the most recent year's data to complete the risk factor profile. In most cases, 2000 is the most recent year for which data is available. In the Risk Factor Data Tables you should enter the percentages (i.e. the rates) for your county for each risk factor indicator. Statewide data has already been entered to assist you with making comparisons.

[10] Western Center for the Application of Prevention Technologies, http://www.unr.edu/westcapt/bestpractices/naarchive.htm.

If you have access to school district or school data, you should review and enter that as well. There are schools within almost all One ME coalitions that did not participate in the 2002 MYDAUS, so you may not be able to gather data for your entire community at this time. Remember to refer to the risk and protective factor information in the *Profile of Coalition Schools using MYDAUS 2002 Data* document provided by RTI International. This information will help you create a risk and protective factor profile that is specific to your coalition.

Protective Factors

Protective factors are conditions that build resilience to substance abuse and can serve to buffer the negative effects of risks.[11]

Protective factors can be assessed at the same levels as risk factors including the community, school, family and individual and peer domains. You will gather and review protective factor data from MYDAUS for the following domains:

Community Domain

- Community opportunities for positive involvement; and
- Community rewards for positive involvement.

School Domain

- School opportunities for positive involvement; and
- School rewards for positive involvement.

Family Domain

- Family attachment;
- Family opportunities for positive involvement; and
- Family rewards for positive involvement.

Peer/Individual Domain

- Belief in moral order;
- Religiosity; and
- Social skills.[12]

[11] Chapter 1: Determine Prevention Needs and Assets, Achieving Outcomes: A Practitioner's Guide to Effective Prevention (2002 Conference Edition). U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse, p. 6.
[12] Maine Youth Drug and Alcohol Use Survey, http://www.maineosa.org/data/mydaus.

Begin by selecting and generating your county's MYDAUS 2002 *Protective Factors* reports for Grades 6, 8, 10 and 12. If available, generate reports for the school district(s) or schools in your area. The school-level data may be useful in determining where resources are most needed. It may be helpful to use a table such as the one in Appendix E to record the data. Protective factor data from MYDAUS is displayed in the same format as the risk factors, with the county percentages and state averages. You should enter the percentage of students reporting the presence of each protective factor for your county in the table. The statewide averages have been entered for you.

In looking at the protective factor data from the MYDAUS, think about the following questions:

- How does your county compare with the state averages for the protective factors?
- In which domain(s) does your county do well in terms of protective factors?
- Which protective factors are the strongest in your community? Which are the weakest? and
- How do the school districts/schools compare with the county and state?

Environmental Assessment

As you collect the data from MYDAUS and OSA, you may have recognized the limitations of available data. For example, the OSA indicator data is not available at a lower level than by county. Also, most of you were not able to access all of the MYDAUS data at the school level that you would have liked. Additionally, it can be difficult to find data on community policies, norms and attitudes favorable to substance use unless a specific survey has been administered on that topic. To develop a better picture of community policies and norms, other data collection may be necessary. The qualitative methods you should use for One ME include the following:

- Interviews with community experts;
- Focus groups with community experts; and
- A community scan of businesses and the local media.

Principals, teachers, school counselors, caseworkers, sheriffs, parks and recreation staff, shelter staff, probation officers, police officials, medical practitioners and parents of youth are examples of community experts. Their positions allow them to observe and monitor community functioning and provide a reliable assessment of substance use observed within their areas of responsibility.

Two strategies can be used to collect data from community experts. The first involves open-ended interviews. Open-ended interviews provide general themes for discussion, but allow for exploration beyond the suggested framework, such as when the community experts introduce their own ideas and issues. The second involves the conduct of focus group discussions.

Interviews

Community expert interviews will be used primarily to examine policies around youth alcohol and tobacco use and the degree to which those policies are enforced. This qualitative data collection effort will focus on schools, parks and recreation entities and law enforcement agencies. The policies and regulations should explore the following:

- Do policies on youth substance use exist? If so, on what level (formal or informal)?
- Are there clearly defined consequences for violations?
- Are laws and policies enforced consistently? If not, where are the variations?

Begin by generating a list of names and contact information for local community experts, including junior and high school administrators, parks and recreation directors and head law enforcement personnel. Contact the individuals listed and ask them if they would be willing to participate in an interview and if not, could they designate an alternate. Explain the purpose of the interview and briefly discuss your One ME coalition. Assure the person that the responses to the interview questions will be confidential.

A minimum of ten interviews should be conducted encompassing the three fields noted above. In Appendices G, H and I, there are interview questions for school administrators, parks and recreation directors and law enforcement officials. If possible, a representative from each school district within your coalition should be interviewed. If you are not able to interview ten people from schools, parks and recreation and law enforcement agencies, supplement your interviews with other community experts familiar with policies on substance use among youth and policy enforcement. Other possible community experts include judges, district attorneys and staff from agencies or programs that serve youth. Keep in mind that by interviewing more than one person in a particular field, you will minimize the risk of obtaining information slanted by strong opinions and will keep the data more reliable.

Focus Groups

In addition to interviews, focus groups can also be used to gather qualitative information from community experts. Focus groups are led by a group leader, who presents questions and facilitates the discussion. Community experts attend and participate in the group discussions, sharing ideas and observations and clarifying issues.

The purpose of your One ME focus groups is to gain the community's perspective on the nature and extent of the substance use problem among youth. In addition to the collection of information, the focus groups you conduct will serve to get people thinking and talking about the issue of youth substance use. A list of focus group questions on both alcohol and tobacco is provided in Appendix J. The questions are designed to gather the perceptions of community members on the extent of the substance use problem, availability issues and community norms. A short questionnaire to collect information about focus group participants' perceptions about the ease of availability, the settings where youth engage in substance use and messages around acceptability of use is provided in Appendix K. This questionnaire should be administered prior to the start of the focus group and should be completely voluntary.

Coalitions will need to conduct at least four focus groups: one with youth, one with parents and two with a variety of community experts from the list outlined below. Super coalitions should conduct at least eight focus groups: two with youth, two with parents and four with other community experts.

In addition to the youth and parent focus groups, your other focus groups should include experts from at least five of the following groups:

- Law enforcement (including alcohol beverage control agencies);
- Juvenile and criminal justice system;
- Youth workers/juvenile services agency staff;
- Health departments;
- Substance abuse prevention and treatment experts;
- Educators from secondary schools;
- Elected officials;
- Media representatives;
- Civic groups;
- Faith community;
- Medical community; and
- Businesses who sell alcohol and/or tobacco products.

When preparing for the focus group, the following should be considered:

1. Find someone to lead the focus group. This person should have experience facilitating groups, be a good listener and know something about the topic, but have the ability to appear neutral about participant opinions.

2. Find a note-taker to record what is said. Focus groups are often tape-recorded, but only with permission from the group members.

3. Decide whom you will invite to participate. Remember to include a diverse group of participants. For example, if your coalition covers three school districts, the student focus group should have students from all three districts. The groups should be carefully planned so as to create a non-threatening environment in which participants feel free to express their opinions.

4. Determine whether you will need to provide some type of incentive for people to participate.

5. Decide when and where the focus groups will be held. Groups should last no more than an hour and a half.

6. Review the focus group questions. Are there other questions you want to add? Are there questions you wish to re-word? Develop more probing questions if you feel it is necessary, particularly based on other information you have already collected. Probes are intended to elicit responses from participants if no one answers the original question posed. Try not to ask simple "yes" or "no" questions.

7. Recruit your members. It is suggested that your groups each have between six and ten people.

8. Make sure you have all of the materials you will need for the groups ready in advance (e.g., a copy of your questions and probes for the group's facilitator and the note taker, pens or pencils and copies of the participant questionnaire).

When the group meets:

1. Administer the questionnaire provided for you in Appendix K. Have participants fill it out as they come in before the group starts.

2. Thank the participants for agreeing to be a part of the group.

3. Have the participants introduce themselves by first name only.

4. Explain the purpose of the group and why those in attendance were recruited to participate.

5. Explain how the meeting will be structured and the ground rules, including:

    - Only one person should speak at a time;
    - Be respectful of the opinions of others;
    - Everyone is encouraged to participate; and

- Participants will not be identified to anyone or in any report and their opinions and responses will be anonymous.

6. Make sure all participants have an opportunity to be heard.

7. When you have finished with the focus group questions, ask if people have any other comments. Tell the participants how their input will be used and thank them for participating. You may want to prepare a summary of all of the focus groups you conduct and distribute the summary to the participants.[13]

Soon after each focus group, while the information is fresh in your mind, review the information that was recorded. What are the common themes? Did you hear anything that you want to follow up on or learn more about?

Community Scan

The final activity in the environmental assessment is to conduct a scan of your community. It is important to take a close look at your community to see what types of messages are being conveyed to youth regarding substance use. This scan involves the examination of the practices businesses use to promote and sell alcohol and tobacco products and/or deter underage youth from purchasing these products. It also involves a review of media coverage and advertising in print, radio and television.

Business Scan

To scan businesses in your community, you should have coalition members visit at least one of each of the following places and answer the questions provided in Appendix L:

- Mini-mart/convenience store;
- Supermarket;
- Liquor store;
- Restaurant;
- Drug store; and
- Tavern/bar/pub.

You should encourage a scan of a wide geographic area and ensure that coalition members are not visiting the same locations.

[13] Adapted from Community Tool Box: http://ctb.ku.edu/ and Needs Assessment & Strategic Planning – Community How to Guide on Underage Drinking Prevention, National Highway Traffic Safety Administration, March 2001.

Media Scan

The examination of the media is divided into two parts, coverage and advertising. Appendix M contains questions on coverage. The questions are designed to collect information on current media coverage related to youth substance use, and are administered through interviews with media representatives. Not only will your coalition become more focused on current media messages, but you may also generate media interest about prevention and your coalition efforts.

To assess local media advertising and public service announcements, you should look at print, radio and television advertising. The purpose of this activity is to find out how much advertising is taking place and to determine how much of it intends to promote substance use and how much is aimed at prevention. Instructions and questions for this activity are provided for you in Appendix N.

Community Resources

It is important to know what programs are currently operating in your communities. "A resource assessment will assist you in the following:

- Identifying gaps where new services should be implemented;
- Avoiding duplication in services;
- Building collaboration among service providers;
- Modifying existing resources to sponsor new programs;
- Identifying existing resources to sponsor new programs;
- Ensuring you are putting your time and money where it will have the greatest impact;
- Ensuring you are creating a comprehensive prevention strategy for your community; and
- Ensuring you are effectively impacting priority risk and protective factors."[14]

To assess community resources, you will need to create a comprehensive list of the following programs in your community:

- Substance abuse prevention programs for youth; and
- Substance abuse treatment programs for youth.

The members of your coalition should be able come up with a list of the majority of programs in your community, but you many want to consult the following resources to be sure your list is comprehensive.

[14] Southeast CAPT website. http://www.secapt.org/science4.html.

- OSA's on-line directory of Programs and Services in Maine (http://www.maineosa.org/directory);
- Yellow pages; and
- Community action councils.

Once you have a list of community programs, contact each by telephone or in person and complete the table entitled "Community Resources Assessment" in Appendix O.

In addition to prevention and treatment activities, it is also important to know what agencies are serving youth in your area. Appendix O also contains a table for you to list the youth agencies in your community and their telephone numbers. Keep in mind that many of these agencies are potential partners for your coalition. In many communities this list will be quite extensive, therefore it would not be practical to interview each agency.

Coalition Resources

For many coalitions, this will be the first time science-based programs are introduced to and implemented within your communities. This effort may also be the first time the groups making up your One ME coalition have worked together. For these reasons, it is important to examine the strengths and weakness of your coalition prior to selecting and implementing programs. This review will assist you in identifying the resources you have to build upon and in recognizing areas that may need work prior to the implementation of a new program.

To assess coalition resources, you will identify the factors that could affect the success of your One ME coalition. It is suggested that you dedicate at least one coalition meeting to this process. It may be helpful to do this exercise after you are well into the needs assessment process, as you will be better able to identify the strengths and weaknesses of your coalition's functioning and you will have a better idea of what community factors could assist or hinder your efforts at that time.

You may have heard the term "SWOT Analysis" before. A SWOT analysis, or analysis of Strengths, Weaknesses, Opportunities and Threats, can guide you in identifying positive and negative factors inside and outside of your coalition. Elements of a SWOT analysis are illustrated below.

	Positives	**Negatives**
Internal	**S**trengths	**W**eaknesses
External	**O**pportunities	**T**hreats

The *internal* factors you want your coalition to look at include the following:

- "Human resources – staff, volunteers, board members, target population;
- Physical resources – your location, building, equipment (Does your building have a prime location? Does it need renovations?);
- Financial resources – grants, funding agencies, other sources of income;
- Activities and processes – programs you run, systems you employ; and
- Past experiences – building blocks for learning and success, your reputation in the community."[15]

The *external* factors to consider that could impact your coalition include:

- Existing prevention and treatment efforts in your community;
- Community culture;
- "Economic climate – local, national, or international;
- Funding sources – foundations, donors, legislatures;
- Demographics – changes in the age, race, gender, culture of those you serve or in your area;
- Physical environment (Is your building in a growing part of town? Is the bus company cutting routes?);
- Legislation (Do new federal regulations make your job harder – or easier?); and
- Local, national or international events."[16]

The following are suggested guidelines for the assessment of coalition resources, or SWOT analysis.

1. Dedicate an entire coalition meeting for this purpose and encourage member-wide participation.

2. Choose one person as a facilitator.

3. Select someone to record the discussion.

4. Have the facilitator describe the purpose of the exercise, define a SWOT analysis and explain how it will be conducted.

5. If you feel that your group is too large, consider dividing the group into smaller groups and then reconvene to discuss and merge the findings.

[15] Community Toolbox:: http://ctb.ku.edu.
[16] Community Toolbox: http://ctb.ku.edu.

6. Spend 10-15 minutes discussing each sector of the SWOT chart (internal strengths, internal weaknesses, external opportunities and external threats), making sure the information is being recorded. The facilitator may wish to use the table ("Coalition Resources Assessment") included in Appendix P as a guide.

7. Discuss what you learned through this process and how your findings could affect science-based program selection and implementation.

8. Prepare a written summary of this exercise. You may wish to distribute the summary to coalition members and use it for coalition planning and goal-setting.

For more information on how to conduct a SWOT analysis, see the Community Toolbox website (http://ctb.ku.edu).

DEVELOPING YOUR COMMUNITY PROFILE

This chapter can also be called "We have a lot of information, but we don't know what to do with it!" Conducting a needs and resource assessment will require some simple organization to allow for some complex thought. This guide includes many data sources and information gathering activities to help you work through the process of identifying the program(s) that will best serve your community. A template (Appendix Q) has been developed to direct you through some basic steps to analyze the data you collected.

Analyzing Your Data

The needs and resource assessment employs varied methods to gather information and make your work meaningful. Some of the data sources will enable you to quantify the extent of youth substance use in your community while others will enable you to qualify the general cause of substance use and what services are readily available. The template is intended to help you bring together the information from the various data collection efforts you have employed and make sense of it. The template has been designed to guide you through organizing the sources of data collected, namely:

- Substance Use Data;
- Creating a Risk and Protective Factor Profile;
- Environmental Assessment;
- Community Resources; and
- Coalition Resources.

The template teases out the information you have gathered and helps direct you to make use of two analysis strategies to measure the gathered data: quantitative analysis and qualitative analysis. Quantitative analysis deals with information expressed as numbers, as opposed to words, and allows you to measure data that can be counted (e.g., responses to a given survey question). The other strategy, qualitative analysis, allows you to understand the concerns of your community members and identify patterns of behavior.

The following provides you with a general guide on quantitative and qualitative analyses. If you have questions on how to make use of either strategy, please contact One ME or HZA for assistance.

Quantitative Analysis

For some of the data sources, the data analysis will already have been completed. Such is the case with the MYDAUS data and OSA indicators. This data will allow you to track trends and identify, for example, whether youth smoking and/or binge drinking has increased or decreased and what age groups are more likely affected.

You also administered data collection instruments, such as surveys and interviews, as part of the assessment process. Certain interview and survey questions may be *quantified*, that is, responses may be counted to measure to what extent a particular issue is prevalent.

For example, school officials, park and recreation directors, and law enforcement officials were asked if underage drinking and tobacco use by youth is a serious problem in their community. Their "yes" responses to this question can be quantified by dividing the total number of "yes" responses by the total number of all responses for that particular group and for all groups combined. The following table illustrates how the data may be summarized.

Table 1. Sample Data Summary

Is underage drinking a serious problem?			
Community Participant	Number of Yes Responses	Total Number of Responses	Percentage
Schools	5	10	50%
Law Enforcement	7	12	58%
Parks & Recreation	3	8	38%
Totals	15	30	50%

Analysis of some data will be more complicated. Completing the risk and protective factor profiles is only one part of the task. You must ask yourself—how do these two relate? Do they negate each other? Are there protective factors present that could mitigate risk factors?

Qualitative Analysis

A series of interviews and focus groups were to be conducted with members of your community. In some instances, open-ended questions were posed during the interviews with community experts. The responses need to be analyzed in a slightly different manner than that of yes/no or multiple-choice questions where the results can be quantified.

Qualitative analysis calls for a different approach. The responses need to be carefully reviewed to identify the primary themes among interview and focus group participants. The themes should first be identified for a specific group (e.g., youth) and then compared to other groups (e.g., parents). In some instances the groups will concur with one another, and in other instances the groups will report variations in opinions.

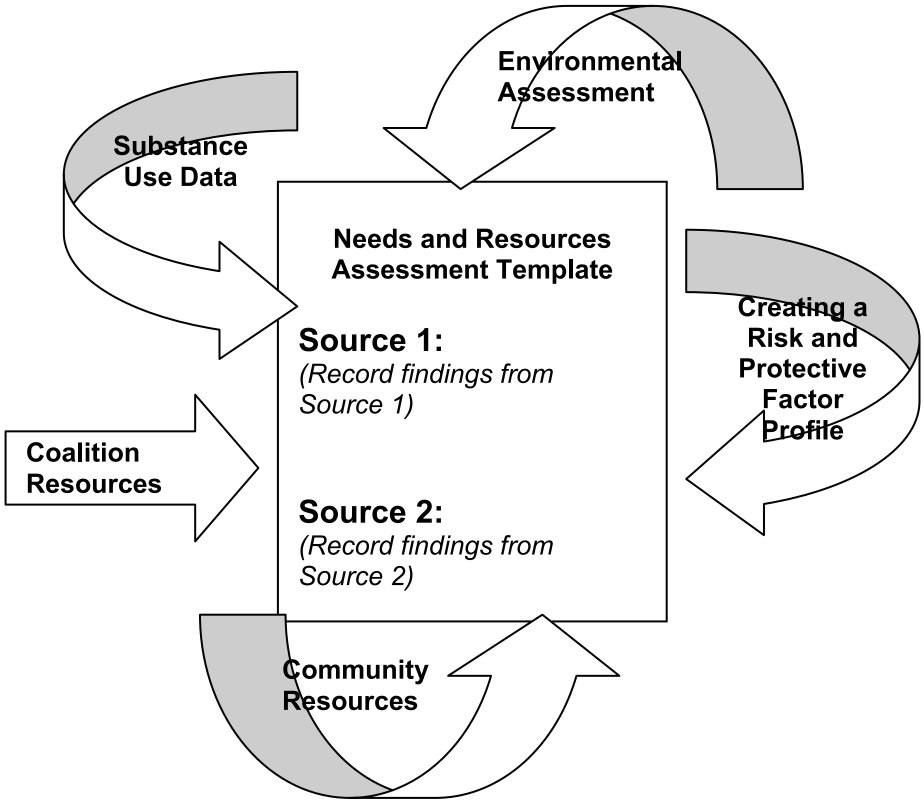
Validating Your Findings

When both types of analyses have been completed, it is recommended that the results of each approach be validated or legitimized. A common approach is to determine if the findings from two different analyses converge or overlap in a meaningful way. One way to validate the findings is to see if the conclusions for a given group, such as law enforcement, were similar regardless of the way the data were collected (e.g., survey vs. focus group). A second way to validate is to determine whether different segments of the community (e.g., parents and school officials) share common beliefs about issues. If this type of analysis reveals true differences in opinion or conclusion then you have two choices – continue to collect data to see if you find more commonality or temper your findings and conclusions in your final needs assessment. The lack of consensus is an important finding that would certainly influence what strategies and programs you select.

Reporting Your Findings

As referenced above, a template has been developed to assist you in reporting the findings of your assessment. Figure 1 illustrates how the various activities you performed throughout the assessment process will be brought together by the template. A section has been provided in the template for you to report the data gathered from each of the data collection efforts you employed. **The template should be completed and submitted to One ME by June 1, 2003.**

Figure 1. Reporting Your Findings



Before moving on to the *Selecting Programs* section of the Guide, you should complete the Needs and Resources Assessment Template in Appendix Q.

SELECTING PROGRAMS

Now that you have completed an extensive review of your data and answered the questions such as the following: which age group to target, what domains to work in and what risk and protective factors to address, you have a better understanding of what your community looks like and where the greatest prevention needs are. Now is time to begin the process of selecting a program (or programs) to address the problem of youth substance use in your community. One ME has developed a list of thirty-two Center for Substance Abuse Prevention (CSAP) model programs for consideration based on the age of the target population of this project, ages 12 to 17.

One ME Model Programs List

1. Across Ages
2. All Stars
3. Border Binge-Drinking Reduction Program
4. Brief Strategic Family Therapy
5. CASASTART
6. Communities Mobilizing for Change on Alcohol
7. Community Trials Intervention to Reduce High-Risk Drinking
8. Creating Lasting Family Connections
9. Families and Schools Together Fast
10. Family Matters
11. Friendly PEERsuasion
12. Leadership and Resiliency Program
13. LifeSkills Training
14. Lions Quest Skills for Adolescence
15. Multisystemic Therapy
16. Olweus Bullying Prevention Program
17. Parenting Wisely
18. Positive Action
19. Preparing for the Drug Free Years
20. Project ACHIEVE
21. Project ALERT
22. Project Northland
23. Project SUCCESS
24. Project Toward No Drug Use
25. Project Toward No Tobacco Use
26. Reconnecting Youth
27. Residential Student Assistance Program
28. Responding in Peaceful and Positive Ways
29. Second Step

30. Start Taking Alcohol Risks Seriously (STARS) for Families
31. Students Managing Anger and Resolution Together
32. Too Good for Drugs

Choosing to implement a model program should increase the chances of success of your prevention efforts because these model programs have been evaluated and have shown consistently positive outcomes. Additionally, the developers have indicated their availability to assist you in the replication of their programs.

In CSAP's terminology, model programs have all of the positive characteristics of effective programs with the added benefit that program developers have agreed to participate in CSAP-sponsored training, technical assistance, and dissemination efforts.[17]

Appendix R contains a matrix of the One ME model programs and some of their key features. This matrix will be posted on the OSA website for your reference. The matrix contains links that take you directly to the programs' websites. With the results of your needs and resources analysis in hand and with specific questions answered about target age, domains, and risk and protective factors, you should be able to begin looking at the basic features of the programs to narrow the list down to five or six potential programs for your coalition to implement. The following steps will help reinforce the important components of program selection:

1. Identify the domains within which your program will work (e.g., individual, school, community, family).

2. Review the prioritized risks and protective factors that characterize your community and domains.

3. Cross-reference the conditions suggested by your needs and resources assessment with the matrix of science-based programs. List those programs that you consider "promising" or "closely matching" the results of your assessment.

4. From that initial list, compare the goals and requirements of the model programs with your coalition's resources (human, material, technical) and objectives.

[17] Chapter 3: Select Programs, Achieving Outcomes: A Practitioner's Guide to Effective Prevention (2002 Conference Edition). U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse, p. 77.

5. Finally, research those five or six programs in greater depth to find two or three that you feel are appropriate for implementation in your community. If for some reason you are unable to find a model program to meet the needs of your community, you should work with One ME staff to identify alternative programs. Your research should include discussions with the program developers to discuss the nuances of their programs.

During your environmental assessment, you may have identified an area or topic appropriate for an environmental strategy. One ME is encouraging coalitions to implement environmental strategies in addition to model programs, if resources permit. Environmental strategies establish or change community standards, codes and attitudes to influence incidence and prevalence of substance abuse. The strategies can center on legal and regulatory issues or relate to service and action-oriented initiatives. A list of those strategies is included in Appendix S. Descriptions and how to access additional information on the strategies can be found on the Western CAPT website (http://www.open.org/~westcapt/).

Once you have identified a few programs that you would consider implementing, you should assess the feasibility of implementing them. The Feasibility Assessment in Appendix T, adapted from CSAP's Northeast Center for the Application of Prevention Technologies, will help you determine the fit between the program requirements and your organizational and community resources. Completion of the feasibility exercise will necessitate research and contact with the program developers.

One ME staff encourage the selection of multiple programs. Your needs and resources assessment and community profile could reveal a complex mix of problems that cannot be addressed by one single model program.

Feasibility of Implementation

Feasibility assessment is a structured, systematic process designed to help prevention practitioners assess the ease of implementing a single program or choose the most appropriate program from among several possibilities.[18]

The goal of assessing the feasibility of implementation is to find the most suitable program(s) that meets the needs identified in your community

[18] Training Manual: Selecting Appropriate Prevention Programs through Feasibility Assessment. Developed by Chelsey Goddard and Wayne Harding, CSAP's Northeast Center for the Application of Prevention Technologies (CAPT).

assessment and can be easily implemented with fidelity (in other words, without significant changes!) to the model program.

Complete the feasibility assessment, located in Appendix T, for the two or three programs you are considering. For the first two sections, Resources and Target Population, enter the program-specific information you collected from your needs assessment and discussions with the developers in the second column. In the third column, describe your capacity in comparison with the program information. Rate your capacity on a scale of one to four, with one meaning that, given your current capacity, it would not be feasible to implement the program and four indicating that it would be very feasible. For the remaining sections (Organizational Climate, Community Climate, Evaluability and Sustainability) describe and rate your capacity on each item.

When you have completed the form, add all of the circled numbers and enter the total score at the end of the form. A low score is indicative of a program that may be difficult for you to implement, whereas the converse is true for a high score.

Final Selection

Now that you have completed your needs and resources assessment, researched science-based prevention programs and thoughtfully examined the feasibility of implementing a number of programs, you are ready to select a program or programs to implement.

Appendix U includes four questions that should be answered and submitted to One ME staff by June 1st along with the completed Needs and Resources Assessment Template in Appendix Q.

PREPARING FOR EVALUATION OF PROGRAMS

After you have selected one or more programs, you will be working with HZA or RTI International to create essential tools to ensure successful program performance: logic models and evaluation plans. This chapter is included to help you think holistically about preparing for evaluation even as you are making a final decision about the model program your coalition will implement.

Logic Models

What is a Logic Model?

A logic model is a tool used to confirm the reasoning of a proposed project by providing a picture of a program's theory and action. Using a logic model helps you clarify broad, fuzzy goals, summarize the key elements of the program and distinguish between your inputs/activities and outcomes. It depicts a logical chain of connections showing what the program is trying to accomplish through a series of "if-then" relationships. This tool will help you measure your program's performance and show strengths and weaknesses in the chain—from your inputs to the goals your program hopes to achieve. In short, the logic model helps you figure out if your program is solving the right problems in the right ways.

What Does a Logic Model Look Like?

A simplified view of a sample logic model is shown in Figure 2. A logic model outlines from beginning to end your problem, the inputs (resources), the outputs (activities and products) and the outcomes (the short and long term changes you hope to accomplish).

Logic models come in all different shapes and styles. Flow charts and tables are effective means of drafting and finalizing program logic models. For the One ME program, we will be looking at these types.

How do I Create a Logic Model?

Creating a logic model sounds more onerous than it really is. First, you need to understand some of the common terms.

- ***Program* –** A series of organized activities and resources aimed to help people make improvements in their lives.

- ***Accountability* –** Responsibility for effective and efficient performance of programs. Measures of accountability focus on (1) benefits arising from the program as valued by customers and collaborators; and (2) how resources are invested and the results attained.

- ***Inputs* –** Resources that go into a program including staff time, materials, needs assessment results, money, equipment, facilities and volunteer time.

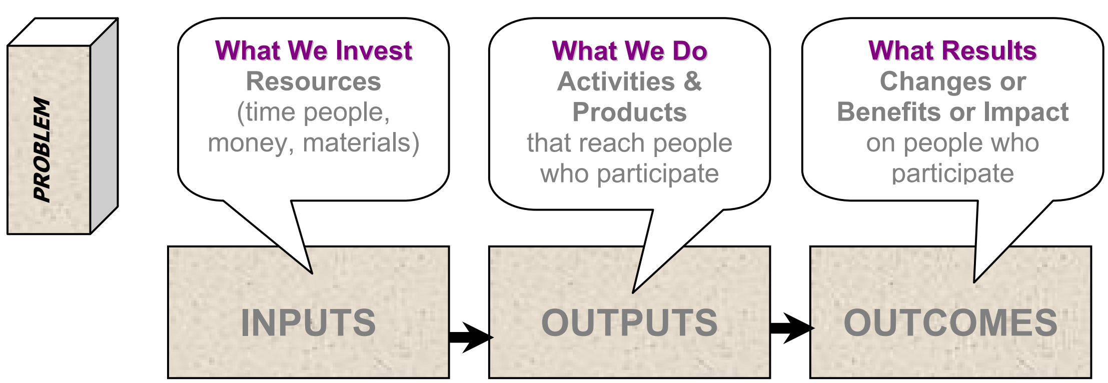
- ***Outputs* –** The activities, products and participation that are generated through the investment of resources.

- ***Outcomes* –** Results or changes that occur from your program's efforts. Outcomes answer the question... "So what?" What difference has the program made in peoples' lives? Whose lives? Outcomes may relate to changes in knowledge, awareness, skills, attitudes, opinions, aspirations, motivation, behavior, practice, decision-making, policies, social action, condition or status. Outcomes may be intended and unintended; positive and negative.

  Outcomes fall along a continuum from initial (short-term) to intermediate (medium-term) to final outcomes (long-term), which are often synonymous with impact.

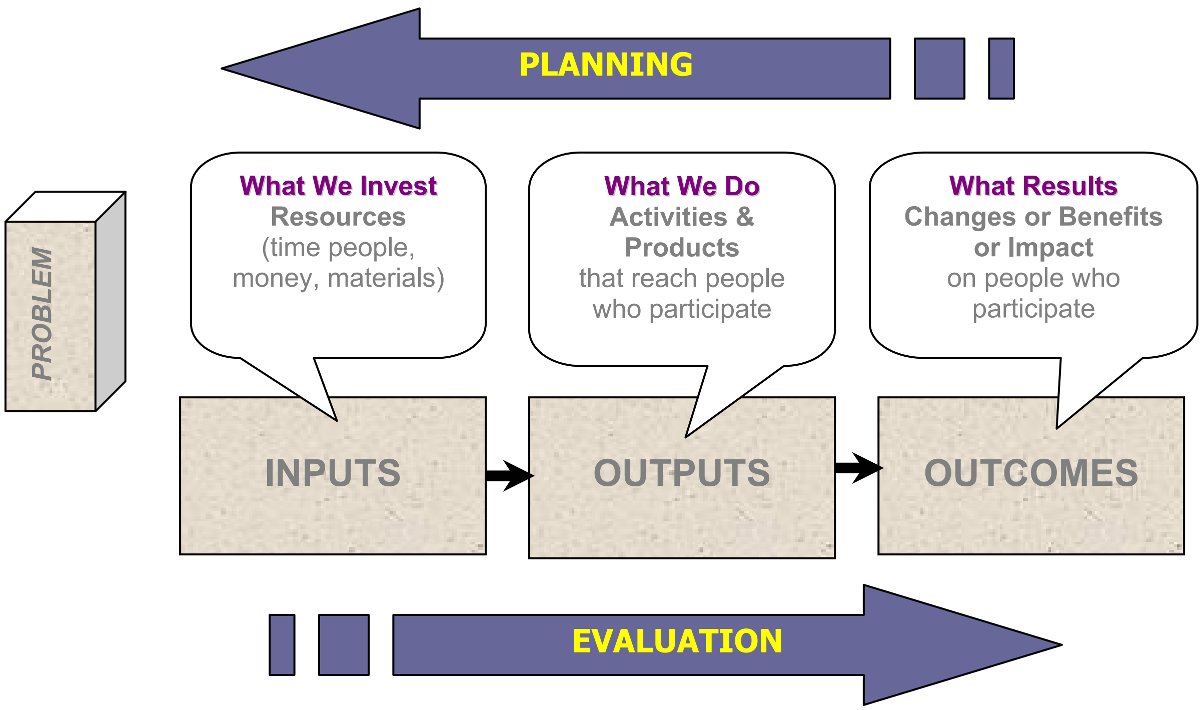
- ***Impact* –** The social, economic, civic and/or environmental consequences of the program. Impacts tend to be longer term and so may be equated with goals. Impacts may be positive, negative and/or neutral; intended or unintended.

Figure 2. Simple Flow of a Program Logic Model



Now that we understand the terms, think about what you already know about the program. If your program has been in operation for a while, it might be helpful to construct a logic model in the following fashion. If you are in the planning stage of a new program, you might start with the long-term expected end result—the ***impact***—and work backwards. "What is our long-term desired result?" "What will be different as a result of this program?" "What must happen in each preceding step to get us there?" Figure 3 outlines these steps in more detail.

Figure 3. Asking Yourself "Where do I start?"



There is no ending point because a logic model is dynamic. It will change as the program changes. It is important to remember that **the process of developing a logic model should bring all key stakeholders to a shared understanding of what the program is and what it will do.**

We're almost ready to construct a draft of your logic model. First, we are going to consider what we mean by "if-then relationships." If-then relationships show causal linkages among inputs, outputs and outcomes. For example:

If your program invests time and money…
Then your staff will be able to implement a prevention curriculum.

If your staff is able to implement a prevention curriculum…

Then youth will have increased knowledge about the risks of tobacco and substance use.
Then youth will learn new skills to resist risky behaviors.
Then youth will display increasingly negative attitudes toward smoking.

If youth have increased knowledge about the risks of tobacco and alcohol use…
If youth learn new skills to resist risky behaviors…
If youth display increasingly negative attitudes toward smoking…
Then we will see a reduction in the number of teens who intend to smoke.

If there is a reduction in the number of teens who intend to smoke…
Then we might see a reduction in incidence and use among teens over time.

Beware of Assumptions

Underlying your if-then relationships are assumptions about your program, how it will work and what it will achieve. In the example of implementing a substance use prevention curriculum, you may assume that the curriculum best matches the needs of your community, that your staff can adequately deliver the elements of the curriculum and that youth will respond appropriately to the program message. There is an assumption that once developed, the program will, in fact, meet the needs of your youth. Finally, there may be an underlying assumption that the collaborative efforts of your coalition will make a difference relative to the problems faced by your community's youth. As you develop your logic model, think about the underlying assumptions. Are they realistic? What evidence or research do you have to support your assumptions?

Mindful of the causal relationships among the pieces of the logic model, we will try to work through the steps to construct the first part of your logic model. The first step is to identify the problem you are trying to solve. For instance, your program may try to focus on preventing tobacco use among teens in your school district. The PROBLEM, clarified from needs assessments and MYDAUS data, might be that an alarming number of youth are using tobacco products with regularity by the age of 14.

Identifying the resources you have and need to address the problem is the next step in constructing your logic model. Resources include such items as time, personnel, money, materials and training needed to accomplish the job. These are your INPUTS.

The next step is to identify the activities engaged by your resources to effect change. These activities, a category of OUTPUTS, might include implementation of a particular curriculum, a public awareness event or campaign or presentations to youth groups or school assemblies. At this point, it is helpful to name the groups that may participate in your activities, particularly those whom you are trying to reach. For instance, to target a specific subgroup, you might generate materials relevant to youth. Participation is the second category of OUTPUTS.

The final step in creating your logic model is to define the initial, intermediate and long-term goals you hope to achieve. Your goals are defined as OUTCOMES. There are three types of outcomes, initial, intermediate and long-term. Initial outcomes reflect an immediate change in ***knowledge, attitude*** and ***skills***. For instance, a group of teens may choose to quit smoking at the same time, or a number of youth indicate their commitment to never engage in the habit. Intermediate outcomes are represented by sustained, modified ***performance*** and ***behavior***. They can be noted by actions taken by the participants as developing skills. Using the example from the previous paragraph, the teens who quit are learning to make healthy choices in lieu of tobacco use. Long-term outcomes measure the effect of change and benefit or impact the larger pool of statistics and data. A long-term outcome is measured over time and should demonstrate an improved state of health or general well-being. Our group of teens who no longer smoke cigarettes may be part of a larger population who has also changed their behaviors because of prevention and intervention, and these youth in sum have helped to reduce the proportion of teens who use tobacco in Maine.

Outcomes are the benefits or results of a program. **They are the changes and impacts experienced by the people who participate in your program.** Outcomes answer the "SO WHAT?" question—are we making a difference because of our program? Be sure not to confuse OUTCOMES with OUTPUTS. Be driven by your outcomes, not your activities.

Table 2. Outputs and Outcomes

OUTPUTS *Activities*	**OUTCOMES** *Results*
To engage youth in resistance skills training to make informed and healthy choices around substance use	Youth learn new skills to resist risky and unhealthy behaviors

When selecting your outcomes, ask yourself:

- Are my outcomes **important**?;
- Which outcomes are **meaningful** for the participants and OSA?;
- Is our expectation to influence this outcome **realistic**?; and
- Given our resources, activities and participants, are the outcomes **reasonable**?

Some outcomes may have significant results that might mean policy changes or major improvements in the health status of participants and their communities. Some outcomes are smaller, but no less significant. Important to recognize as you generate outcomes for your programs is to confirm that your outcomes have value for your agency, your coalition, your region, your state. Your outcomes should best reflect what you could control or influence.

Test Your Logic

Let's use the information described above and put it into logic model form.

1. PROBLEM Identification: (Figure 4) 79% of youth aged 12-18 in Bangor report that they are considering or have used tobacco 1-3 times in the past week.

2. INPUTS: Identify your resources – what you invest (Figure 5)

    a. Youth counselors;
    b. Substance abuse prevention curriculum;
    c. Brochures;
    d. Community Volunteers;
    e. Collaborative partners (law enforcement, schools, hospitals or medical personnel, etc);
    f. Administrators; and
    g. Needs Assessment Results.

Figure 4. Problem Identification

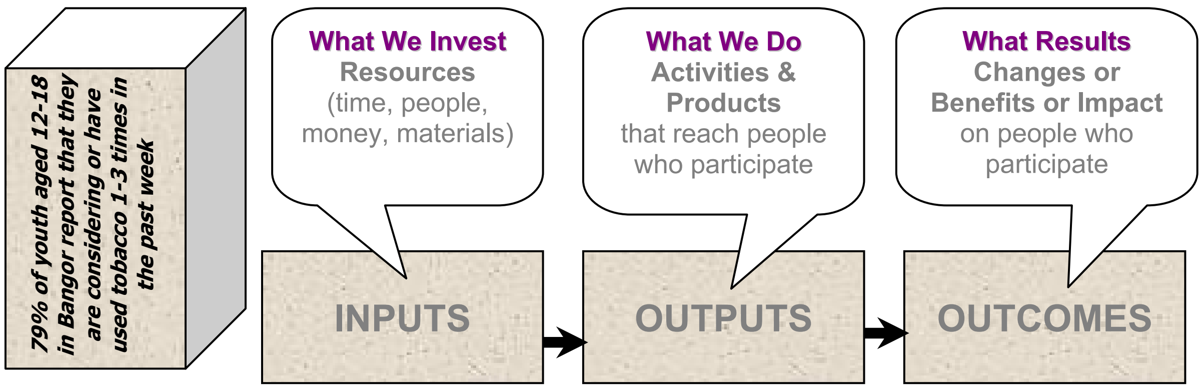
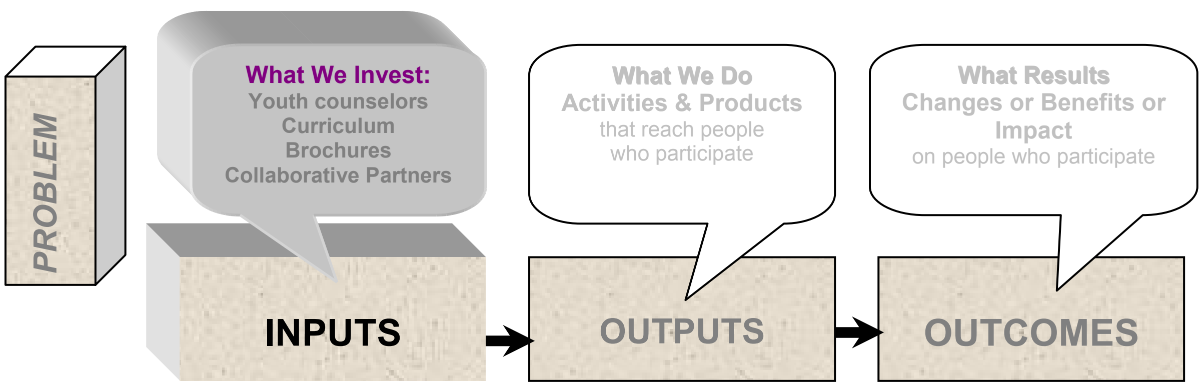


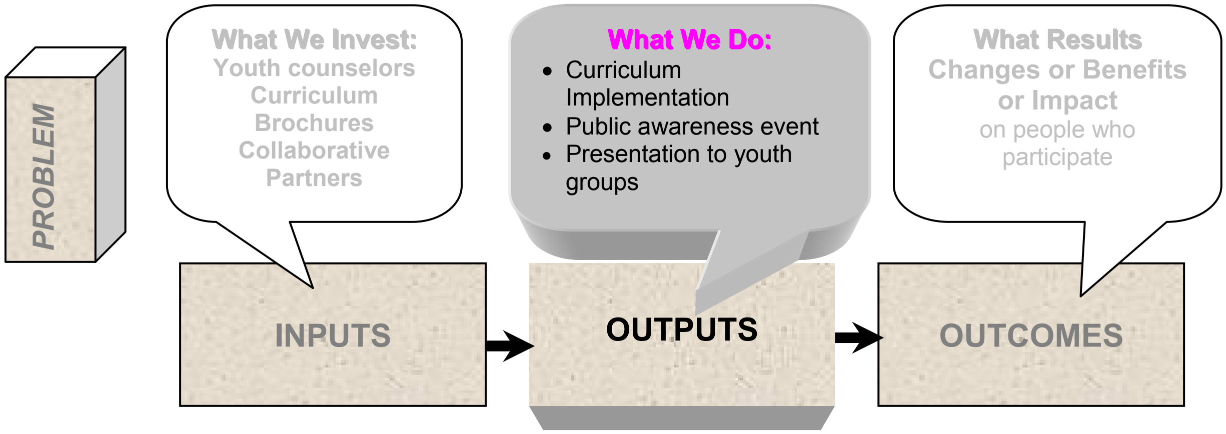
Figure 5. Inputs and Resources



3. OUTPUTS: Identify the activities – what you do (Figure 6)

h. Curriculum Implementation;
i. Public awareness event; and
j. Presentation to youth groups.

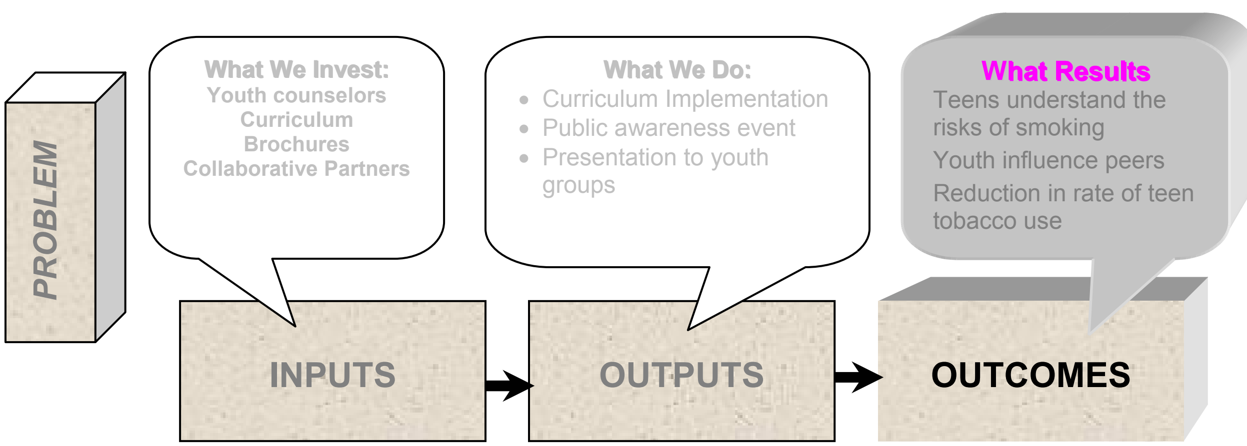
Figure 6. Outputs and Activities



4. OUTCOMES: Identify program outcomes – what results you achieve (Figure 7)

   a. Initial (Learning);
   b. Intermediate (Action); and
   c. Long-term (Conditions).

Figure 7. Outcomes



Fill Out the Logic Model

While the use of a flow chart works well to help develop the structure of your logic model, it will be more useful and meaningful to incorporate the logic model in a table format. We can take the sample information from our examples above and put them in a table with more detailed information.

Table 3. Sample Prevention Program Logic Model in Table Format

	Inputs	Outputs	Outcomes/Impact		
Problem	**Resources**	**Activities**	**Initial**	**Intermediate Term**	**Long Term**
Youth Tobacco Use	Youth counselors trained in substance abuse prevention Collaborators (hospitals, clinics, local police, CPS) Relevant curricula Community volunteers	Curriculum implementation Public awareness event Media campaign Presentations to local groups	Youth gain new knowledge and changed attitude about tobacco use	Youth demonstrate sustained behavior modification (reduce/cease use) Youth demonstrate skills needed to avoid use	Reduction in the proportion of youth using or experimenting with tobacco products State ratio improves Increase in percentage of youth who are not using tobacco

How Good Is Your Logic Model?

Now that you have put some thought into the logic model, have the members of your coalition review the model. Starting with outcomes, make sure that each listed outcome is truly an 'outcome' and that the logic model clearly separates outcomes from outputs. Ask the coalition if the highest-level outcomes are meaningful and have value to the public.

Next the model should be examined to determine if it is truly logical. There are three ways to check the causal relationships within the model. One, starting at inputs, ask "why?" at each level. Why do we need these inputs? Why do we need to conduct these activities?

The next way to check the logic of your model is to start at the impact level and work backward asking “how.” One should find the answer to “how” in the preceding section of the model. How the outcomes will be produced should be answered by looking at the items immediately preceding it.

The third way to check the logic of your model is to ask, “what else?” Sometimes components are necessary but not sufficient. For example, reducing cigarette smoking among teens requires not only changing attitudes about smoking but also achieving a reduction in actual tobacco use. Asking 'what else?' helps spot leaps of faith.

Finally, looking at your logic model as a whole and in the context of your coalition and community, consider the following questions:

- Are the resources realistic? Is what you intend to do even possible given your resources?
- How valid are the assumptions? Are they based on experience and research, or are they your best guesses?
- Does the logic model reflect the opinions and support of key stakeholders?

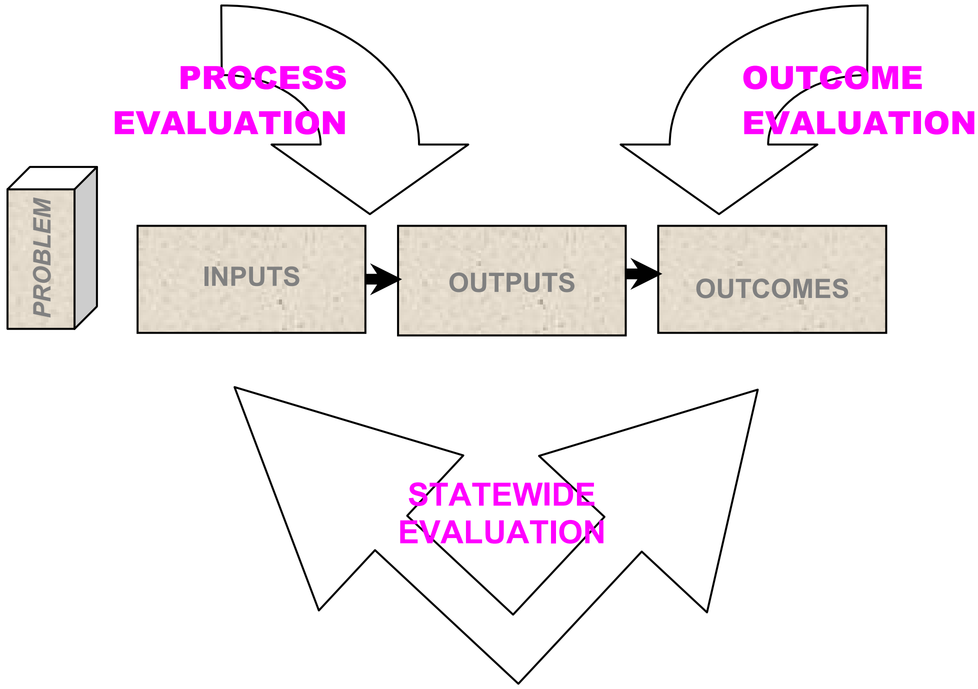
Evaluation Plans

Designing an evaluation plan for your program takes thought and careful attention to detail, but like creating the logic model, developing an evaluation plan is not an impossible task. In fact, having a logic model will make your job much easier because you have already defined your population, activities and the results you hope to achieve. The issue now is how to measure it. To help you create an evaluation plan, we will discuss the elements and purpose of evaluation designs as they relate to the One ME project.

Your program will be evaluated not only on the outcomes you set to achieve (Outcome Evaluation), but also by how well you were able to accomplish your goals (Process Evaluation). You will be assisted in carrying out the evaluation by One ME’s two contractors, RTI International and Hornby Zeller Associates, Inc. Remember, as well, that your program’s performance will be measured against the performance of the One ME subrecipients as a group and the total impact on state and community levels (Statewide Evaluation). What does this mean exactly?

Let’s look back to our logic model from the previous section. In that model, we defined the problem you are hoping to change, listed the resources you have to invest, the activities you intend to do, and the results you want to achieve. The evaluation design will be constructed around these elements in a way that helps you ensure that your program is solving the problem in the right ways and with the right tools. The evaluation plan is your guide to staying on track.

Figure 8. Program Logic Model and Evaluation Elements



Using the figure above, we can divide the evaluation plan into three stages, each of which corresponds to a portion of the logic model. The first stage consists of a process evaluation which looks at the actual operation of the project. The second stage produces an outcome evaluation of the results. These stages apply to the third stage, represented by both the statewide evaluation and its review of the local community partnerships. These evaluation plan stages are connected and related – success for one stage may be anticipated based on the positive outcomes from another.

The evaluators will work with each coalition to develop evaluation plans based on the specific programs you choose to implement. The types of issues that will be covered in the plans are:

What specifically are the **questions** the evaluation should answer?

- For example*, to what extent is your program reaching the appropriate target population?*

What are the **key variables** required to answer that question?

- For example, *what ages are served?*

What are the **sources of data** to answer the questions?

- For example, a*ttendance records.*

What are the **procedures for collecting** the information?

- For example, *collection of attendance records from teachers.*

What are the **methods of analyzing** the information?

- For example, *compare the age of the people served with that specified in the model.*

The information provided on logic models and evaluation plans is intended just to get you thinking about the One ME evaluation. You will receive extensive evaluation training in April and Hornby Zeller Associates, Inc. and RTI International will be guiding you through the evaluation process for the duration of the One ME project.